CONSORT-EHEALTH (V 1.6.1) - Submission/Publication Form

The CONSORT-EHEALTH checklist is intended for authors of randomized trials evaluating webbased and Internet-based applications/interventions, including mobile interventions, electronic games (incl multiplayer games), social media, certain telehealth applications, and other interactive and/or networked electronic applications. Some of the items (e.g. all subitems under item 5 - description of the intervention) may also be applicable for other study designs.

The goal of the CONSORT EHEALTH checklist and guideline is to be

- a) a guide for reporting for authors of RCTs,
- b) to form a basis for appraisal of an ehealth trial (in terms of validity)

CONSORT-EHEALTH items/subitems are MANDATORY reporting items for studies published in the Journal of Medical Internet Research and other journals / scientific societies endorsing the checklist.

Items numbered 1., 2., 3., 4a., 4b etc are original CONSORT or CONSORT-NPT (non-pharmacologic treatment) items.

Items with Roman numerals (i., ii, iii, iv etc.) are CONSORT-EHEALTH extensions/clarifications.

As the CONSORT-EHEALTH checklist is still considered in a formative stage, we would ask that you also RATE ON A SCALE OF 1-5 how important/useful you feel each item is FOR THE PURPOSE OF THE CHECKLIST and reporting guideline (optional).

Mandatory reporting items are marked with a red *.

In the textboxes, either copy & paste the relevant sections from your manuscript into this form please include any quotes from your manuscript in QUOTATION MARKS, or answer directly by providing additional information not in the manuscript, or elaborating on why the item was not relevant for this study.

YOUR ANSWERS WILL BE PUBLISHED AS A SUPPLEMENTARY FILE TO YOUR PUBLICATION IN JMIR AND ARE CONSIDERED PART OF YOUR PUBLICATION (IF ACCEPTED).

Please fill in these questions diligently. Information will not be copyedited, so please use proper spelling and grammar, use correct capitalization, and avoid abbreviations.

DO NOT FORGET TO SAVE AS PDF _AND_ CLICK THE SUBMIT BUTTON SO YOUR ANSWERS ARE IN OUR DATABASE !!!

Citation Suggestion (if you append the pdf as Appendix we suggest to cite this paper in the caption):

Eysenbach G, CONSORT-EHEALTH Group

CONSORT-EHEALTH: Improving and Standardizing Evaluation Reports of Web-based and Mobile Health Interventions

J Med Internet Res 2011;13(4):e126 URL: http://www.jmir.org/2011/4/e126/

doi: 10.2196/jmir.1923

PMID: 22209829

*Obligatoire

Your name * First Last			
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University of LIlle, Lille Fra	r		
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for patients with Adjustmen	Disorder with Anxiety (ADA):		
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If this is a JMIR submission, please provide the manuscript tracking number under "other" (The ms tracking number can be found in the submission acknowledgement email, or when you login as author in JMIR. If the paper is already published in JMIR, then the ms tracking number is the four-digit number at the end of the DOI, to be found at the bottom of each published article in JMIR)

on o ms number (yet) / not (yet) submitted to / published in JMIR	
Autre : ms 7976	
TITLE AND ABSTRACT	
1a) TITLE: Identification as a randomized trial in the tit	le
1a) Does your paper address CONSORT item 1a? * I.e does the title contain the phrase "Randomized Controlled Trial"? (if not, explain the reason under "other")	
• yes	
O Autre :	
1a-i) Identify the mode of delivery in the title Identify the mode of delivery. Preferably use "web-based" and/or "mobile" and/or "electronic game" i the title. Avoid ambiguous terms like "online", "virtual", "interactive". Use "Internet-based" only if Intervention includes non-web-based Internet components (e.g. email), use "computer-based" or "electronic" only if offline products are used. Use "virtual" only in the context of "virtual reality" (3-D worlds). Use "online" only in the context of "online support groups". Complement or substitute produ names with broader terms for the class of products (such as "mobile" or "smart phone" instead of "iphone"), especially if the application runs on different platforms. 1 2 3 4 5	
subitem not at all important O O O essential	
Does your paper address subitem 1a-i? * Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study "computer-based stress management program"	to
1a-ii) Non-web-based components or important co-interventions in title Mention non-web-based components or important co-interventions in title, if any (e.g., "with telephor support").	ne
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Does your pape	address	subitem	1a-ii?
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Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to
indicate direct quotes from your manuscript), or elaborate on this item by providing additional
information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable for this study: The current study evaluates a digital platform without additional tools					

1a-iii) Primary condition or target group in the title

Mention primary condition or target group in the title, if any (e.g., "for children with Type I Diabetes") Example: A Web-based and Mobile Intervention with Telephone Support for Children with Type I Diabetes: Randomized Controlled Trial

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Does your paper address subitem 1a-iii? *

Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"for patients with Adjustment Disorder with Anxiety (ADA)"				
	,			

1b) ABSTRACT: Structured summary of trial design, methods, results, and conclusions

NPT extension: Description of experimental treatment, comparator, care providers, centers, and blinding status.

1b-i) Key features/functionalities/components of the intervention and comparator in the METHODS section of the ABSTRACT

Mention key features/functionalities/components of the intervention and comparator in the abstract. If possible, also mention theories and principles used for designing the site. Keep in mind the needs of systematic reviewers and indexers by including important synonyms. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

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Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"This prevention program of stress management includes 5 weekly sessions. It is based on standard Cognitive Behavioral Therapy (CBT) principles and includes five modules

1b-ii) Level of human involvement in the METHODS section of the ABSTRACT

Clarify the level of human involvement in the abstract, e.g., use phrases like "fully automated" vs. "therapist/nurse/care provider/physician-assisted" (mention number and expertise of providers involved, if any). (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

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Does your paper address subitem 1b-ii?

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"patients have a minimal contact with any member from the medical staff before and after every session"

"patients receive the same program with a therapist"

We are going to clarify the level of human involvement and to mention the number and the expertise of providers involved.

1b-iii) Open vs. closed, web-based (self-assessment) vs. face-to-face assessments in the METHODS section of the ABSTRACT

Mention how participants were recruited (online vs. offline), e.g., from an open access website or from a clinic or a closed online user group (closed usergroup trial), and clarify if this was a purely web-based trial, or there were face-to-face components (as part of the intervention or for assessment). Clearly say if outcomes were self-assessed through questionnaires (as common in web-based trials). Note: In traditional offline trials, an open trial (open-label trial) is a type of clinical trial in which both the researchers and participants know which treatment is being administered. To avoid confusion, use "blinded" or "unblinded" to indicated the level of blinding instead of "open", as "open" in web-based trials usually refers to "open access" (i.e. participants can self-enrol). (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

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Does your paper address subitem 1b-iii?

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Here for "open", we wanted to say "blinded" and we are going to do the modification.

We have not precised in the abstract whether recruitment and assessments were done online or offline, and we will add this.

1b-iv) RESULTS section in abstract must contain use data

Report number of participants enrolled/assessed in each group, the use/uptake of the intervention (e.g., attrition/adherence metrics, use over time, number of logins etc.), in addition to primary/secondary outcomes. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

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Does your paper address subitem 1b-iv?

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable for this study:

This is the study protocol we do not yet have results.

The results we have for the moment concern an uncontrolled feasibility study, on about ten patients.

1b-v) CONCLUSIONS/DISCUSSION in abstract for negative trials

Conclusions/Discussions in abstract for negative trials: Discuss the primary outcome - if the trial is negative (primary outcome not changed), and the intervention was not used, discuss whether negative results are attributable to lack of uptake and discuss reasons. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

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Does your paper address subitem 1b-v?

Not applicable for this study since we ara not describing Seren@ctif results in this manuscrit	
INTRODUCTION	

2a) In INTRODUCTION: Scientific background and explanation of rationale

2a-i) Problem and the type of system/solution

Describe the problem and the type of system/solution that is object of the study: intended as standalone intervention vs. incorporated in broader health care program? Intended for a particular patient population? Goals of the intervention, e.g., being more cost-effective to other interventions, replace or complement other solutions? (Note: Details about the intervention are provided in "Methods" under 5)

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Does your paper address subitem 2a-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

tools for people with stress or reaction anxiety (somatic pathologies, stress at work ...):

"The future goal of this project is, on the one hand, to complete the program with the new information and communication technologies; internet (e-CBT), mobile (m-CBT), on the other hand, to propose it to a large population, who suffers from reactionary stress and anxiety (at a physical disease, at stress at work ...)."

2a-ii) Scientific background, rationale: What is known about the (type of) system

Scientific background, rationale: What is known about the (type of) system that is the object of the study (be sure to discuss the use of similar systems for other conditions/diagnoses, if appropiate), motivation for the study, i.e. what are the reasons for and what is the context for this specific study, from which stakeholder viewpoint is the study performed, potential impact of findings [2]. Briefly justify the choice of the comparator.

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Does your paper address subitem 2a-ii? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

effectiveness to a stress management program via face-to-face interviews.

"We will add in this section the choice of comparators: 'The comparison with the program implemented face-to-face is intended to highlight the value of e-learning, and the comparison with the control group, who receives general medical care, is intended for comparison

2b) In INTRODUCTION: Specific objectives or hypotheses

Does your paper address CONSORT subitem 2b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Penn State Worry Questionnaire (PSWQ), stress level evaluated by the Perceived Stress Scale (PSS) and the Visual Analogic Scale - Stress (VAS-stress) at 2 and 6 months, and depressive symptoms evaluated by the Beck Depression Inventory (BDI) and the HADS depression subscale at 2 and 6 months. Overall satisfaction is evaluated by the VAS-satisfaction at 2 and 6 months for the two therapeutic groups and at 6 months for the WLC group. The change in consumption of tobacco, alcohol and drugs is evaluated at 2 and 6

METHODS

3a) Description of trial design (such as parallel, factorial) including allocation ratio

Does your paper address CONSORT subitem 3a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"It is a multicenter, comparative, prospective, randomized, open, controlled study in 3 parallel groups"

3b) Important changes to methods after trial

commencement (such as eligibility criteria), with reasons

Does v	our	paper	address	CONSORT	subitem	3b?	×
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Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable for this study.						
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3b-i) Bug fixes, Downtimes, Content Changes

Bug fixes, Downtimes, Content Changes: ehealth systems are often dynamic systems. A description of changes to methods therefore also includes important changes made on the intervention or comparator during the trial (e.g., major bug fixes or changes in the functionality or content) (5-iii) and other "unexpected events" that may have influenced study design such as staff changes, system failures/downtimes, etc. [2].

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Does your paper address subitem 3b-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable for this	study.	
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4a) Eligibility criteria for participants

Does your paper address CONSORT subitem 4a? *

nurse is available to guide the patient in the navigation of the computer program) and (2) pregnant women, as recommended by the French ethics committee. If the subject is a woman, a urine pregnancy test is performed. Additionally, (3) persons incapable of consenting, not having legal protection, or being deprived of liberty and (4) patients with another psychiatric disorder according to the MINI (Mini International neuropsychiatric Interview) were excluded.

4a-i) Computer / Internet literacy

Computer / Internet literacy is often an implicit "de facto" eligibility criterion - this should be explicitly clarified.

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Does your paper address subitem 4a-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The exclusion criteria were subjects who cannot use computer and computer support".

For our study, it is important that subjects can read e-book, dashboards, slides ... This verification is done at the time of the recruitment by the investigator : when subjects have to complete self-questionnaires.

4a-ii) Open vs. closed, web-based vs. face-to-face assessments:

Open vs. closed, web-based vs. face-to-face assessments: Mention how participants were recruited (online vs. offline), e.g., from an open access website or from a clinic, and clarify if this was a purely web-based trial, or there were face-to-face components (as part of the intervention or for assessment), i.e., to what degree got the study team to know the participant. In online-only trials, clarify if participants were quasi-anonymous and whether having multiple identities was possible or whether technical or logistical measures (e.g., cookies, email confirmation, phone calls) were used to detect/prevent these.

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Does your paper address subitem 4a-ii? *

months"	
We are going to precise that these assessments take place at the clinic.	
For the group e-learning, there is a face-to-face component : "Clinician-guidance : Participants have a minimal clinician-assistance, called « minimal contact », to encourage adherence and	

4a-iii) Information giving during recruitment

Information given during recruitment. Specify how participants were briefed for recruitment and in the informed consent procedures (e.g., publish the informed consent documentation as appendix, see also item X26), as this information may have an effect on user self-selection, user expectation and may also bias results.

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Does your paper address subitem 4a-iii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"During a medical interview, the participants will have complete oral and written information detailing the progress of the trial. A newsletter will be given to the participant before it is included in the study, allowing the participant to have a period of reflection. Informed consent will be collected for each topic before they enter the study " (Multimedia Appendix 1).

4b) Settings and locations where the data were collected

Does your paper address CONSORT subitem 4b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

We will clearly indicate in the paper that the evaluations will take place in
consultation.

4b-i) Report if outcomes were (self-)assessed through online questionnaires

Clearly report if outcomes were (self-)assessed through online questionnaires (as common in web-

pased trials) or otherwise.
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Does your paper address subitem 4b-i? * Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" ndicate direct quotes from your manuscript), or elaborate on this item by providing additional
nformation not in the ms, or briefly explain why the item is not applicable/relevant for your study
The self-assessment questionnaires did not go online anymore at the clinic facing the investigator. We will clearly state this in the paper.
4b-ii) Report how institutional affiliations are displayed Report how institutional affiliations are displayed to potential participants [on ehealth media], as affiliations with prestigious hospitals or universities may affect volunteer rates, use, and reactions we regards to an intervention.(Not a required item – describe only if this may bias results)
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Does your paper address subitem 4b-ii?
Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" ndicate direct quotes from your manuscript), or elaborate on this item by providing additional nformation not in the ms, or briefly explain why the item is not applicable/relevant for your study
5) The interventions for each group with sufficient

5) The interventions for each group with sufficient details to allow replication, including how and when they were actually administered

5-i) Mention names, credential, affiliations of the developers, sponsors, and owners

Mention names, credential, affiliations of the developers, sponsors, and owners [6] (if authors/evaluators are owners or developer of the software, this needs to be declared in a "Conflict of interest" section or mentioned elsewhere in the manuscript).

Copy and paste rele	ddress subitem 5-i? vant sections from the manuscript (include quotes in quotation marks "like this" to es from your manuscript), or elaborate on this item by providing additional te ms, or briefly explain why the item is not applicable/relevant for your study
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Does your paper address subitem 5-vi? Does your paper ad	"The flowchart (Figure 1) summarizes the experimental design."	
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Isiappear over the course of the years; also make sure the intervention is archived (Internet Archive, vebotation.org, and/or publishing the source code or screenshots/videos alongside the article). As larges behind login screens cannot be archived, consider creating demo pages which are accessible without login. 1 2 3 4 5 Tubitem not at all important •• essential Does your paper address subitem 5-vi? Dopy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study 5-vii) Access Access: Describe how participants accessed the application, in what setting/context, if they had to prove yet paid) or not, whether they had to be a member of specific group. If known, describe how participants obtained "access to the platform and Internet" [1]. To ensure access for editors/reviewers/readers, consider to provide a "backdoor" login account or demo mode for eviewers/readers to explore the application (also important for archiving purposes, see vi). 1 2 3 4 5 Bubitem not at all important •• essential	5-vi) Digital preservation	
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between
two successive sessions of the program. The patient is encouraged
to practice one or several daily exercises with a duration of twenty
minutes each, five or six days per week (Multimedia Appendix 2)".
Each participant included in the study will receive a lump sum
indemnity

5-viii) Mode of delivery, features/functionalities/components of the intervention and comparator, and the theoretical framework

Describe mode of delivery, features/functionalities/components of the intervention and comparator, and the theoretical framework [6] used to design them (instructional strategy [1], behaviour change techniques, persuasive features, etc., see e.g., [7, 8] for terminology). This includes an in-depth description of the content (including where it is coming from and who developed it) [1]," whether [and how] it is tailored to individual circumstances and allows users to track their progress and receive feedback" [6]. This also includes a description of communication delivery channels and – if computer-mediated communication is a component – whether communication was synchronous or asynchronous [6]. It also includes information on presentation strategies [1], including page design principles, average amount of text on pages, presence of hyperlinks to other resources, etc. [1].

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Does your paper address subitem 5-viii? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The detail of the program content is presented in Table 1."	

5-ix) Describe use parameters

Describe use parameters (e.g., intended "doses" and optimal timing for use). Clarify what instructions or recommendations were given to the user, e.g., regarding timing, frequency, heaviness of use, if any, or was the intervention used ad libitum.

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Does your paper address subitem 5-ix?

"The patient is encouraged to practice one or several daily exercises with a
duration of twenty minutes each, five or six days per week"
E v) Clarify the level of human involvement
5-x) Clarify the level of human involvement
Clarify the level of human involvement (care providers or health profession assistance) in the e-intervention or as co-intervention (detail number and einvolved, if any, as well as "type of assistance offered, the timing and frequency of the timing and the time.
initiated, and the medium by which the assistance is delivered". It may be n
between the level of human involvement required for the trial, and the level required for a routine application outside of a RCT setting (discuss under it

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Does your paper address subitem 5-x?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"by trained clinical psychologists (graduate of a Master of cognitive and emotional therapy with a minimal of one year of practice in CBT and Cognitive-Behavioral Stress Management"

"was performed before and after every session by trained nurse"

5-xi) Report any prompts/reminders used

Report any prompts/reminders used: Clarify if there were prompts (letters, emails, phone calls, SMS) to use the application, what triggered them, frequency etc. It may be necessary to distinguish between the level of prompts/reminders required for the trial, and the level of prompts/reminders for a routine application outside of a RCT setting (discuss under item 21 – generalizability).

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Does your paper address subitem 5-xi? *

lot applicable for this study: it is a computer-based program and all nese tools will be used in a future study, once the interest of the rogram will be demonstrated.	

5-xii) Describe any co-interventions (incl. training/support)

Describe any co-interventions (incl. training/support): Clearly state any interventions that are provided in addition to the targeted eHealth intervention, as ehealth intervention may not be designed as standalone intervention. This includes training sessions and support [1]. It may be necessary to distinguish between the level of training required for the trial, and the level of training for a routine application outside of a RCT setting (discuss under item 21 – generalizability.

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Does your paper address subitem 5-xii? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

videos, audio files, self-help books, portfolio in the form of e-guide, and a log book with the program of the exercises to be realized between

two successive sessions of the program. The patient is encouraged to practice one or several daily exercises with a duration of twenty minutes each, five or six days per week "

"Information, exercises, and homework assignments are delivered by

6a) Completely defined pre-specified primary and secondary outcome measures, including how and when they were assessed

Does your paper address CONSORT subitem 6a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

indicate
for internet based intervention [57].

(2) Anxiety trait is the core of diagnostic of TAA symptoms, and the Spielberger State-Trait Anxiety Inventory (STAI-T) allows to measure anxiety trait, which is distinguished from anxiety state (the Hospital Anxiety and Depression scale and the Hamilton Anxiety Rating scale does

6a-i) Online questionnaires: describe if they were validated for online use and apply CHERRIES items to describe how the questionnaires were designed/deployed

If outcomes were obtained through online questionnaires, describe if they were validated for onlin	ie use
and apply CHERRIES items to describe how the questionnaires were designed/deployed [9].	

and apply CHERRIES items to describe how the questionnaires were designed	/deployed [9].
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Does your paper address subitem 6a-i?	
Copy and paste relevant sections from manuscript text	
Not applicable for this study	
6a-ii) Describe whether and how "use" (including intensity of use/dosag	
Describe whether and how "use" (including intensity of use/dosage) was defin (logins, logfile analysis, etc.). Use/adoption metrics are important process out reported in any ehealth trial.	
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subitem not at all important 🔾 🔾 🔾 💿 essential	
Does your paper address subitem 6a-ii? Copy and paste relevant sections from manuscript text	
"The program includes five 1-hour weekly sessions that patients follow from a program accessible on a computer in our unit"	
6	
6a-iii) Describe whether, how, and when qualitative feedback from particle Describe whether, how, and when qualitative feedback from particle was cemails, feedback forms, interviews, focus groups).	•
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Does your paper address subitem 6a-iii?

"The visual analogue scale of satisfaction (VAS-satisfaction) the overall satisfaction of the program"	measures

6b) Any changes to trial outcomes after the trial commenced, with reasons

Does your paper address CONSORT subitem 6b? *

Copy and paste relevant sections from manuscript text

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable for this study	
	-

7a) How sample size was determined

NPT: When applicable, details of whether and how the clustering by care provides or centers was addressed

7a-i) Describe whether and how expected attrition was taken into account when calculating the sample size

Describe whether and how expected attrition was taken into account when calculating the sample size.

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Does your paper address subitem 7a-i?

"Considering 20% of missing data, 120 patients (40 per group) will be included in the clinical trial."

7b) When applicable, explanation of any interim analyses and stopping guidelines

Does your paper address CONSORT subitem 7b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Statistical analysis will be conducted in a blinded fashion with a blinded code for the intervention.

All statistical analyses will be carried out independently in the department of Biostatistics of the University Hospital of Lille. SAS 9.3 software or later will be used. P-values will be reported as the actual values, unless P<0.001. No interim analyses are planned. A detailed statistical analysis plan (SAP) will be drafted and validated before the database is frozen. Patient characteristics at baseline will be

8a) Method used to generate the random allocation sequence

NPT: When applicable, how care providers were allocated to each trial group

Does your paper address CONSORT subitem 8a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

point in the study) using computer-generated random numbers with block sizes of six and center stratification consistent with the CONSORT standards [48]. The randomization sequence is implemented in the electronic case-report form (eCRF) system to ensure a centralized, real-time randomization procedure. A document describing the randomization procedure is kept confidential in the Clinical Investigation Centre of Lille University Hospital.

8b) Type of randomisation; details of any restriction (such as blocking and block size)

Does your paper address CONSORT subitem 8b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to

indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"This list will based on 6-patient size blocks, balanced (1: 1: 1) between the 3 arms. Randomization will be stratified by center. A document describing the randomization procedure will be kept confidential in the Clinical Investigation Centre of the Lille University Hospital."

9) Mechanism used to implement the random allocation sequence (such as sequentially numbered containers), describing any steps taken to conceal the sequence until interventions were assigned

Does your paper address CONSORT subitem 9? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The treatment will be chosen by random drawing from a pre-established number

10) Who generated the random allocation sequence, who enrolled participants, and who assigned participants to interventions

Does your paper address CONSORT subitem 10? *

"The investigator of one of the three sites involved in the research"				

11a) If done, who was blinded after assignment to interventions (for example, participants, care providers, those assessing outcomes) and how

NPT: Whether or not administering co-interventions were blinded to group assignment

11a-i) Specify who was blinded, and who wasn't

Specify who was blinded, and who wasn't. Usually, in web-based trials it is not possible to blind the participants [1, 3] (this should be clearly acknowledged), but it may be possible to blind outcome assessors, those doing data analysis or those administering co-interventions (if any).

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Does your paper address subitem 11a-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

No one was blind from the participant's group.

11a-ii) Discuss e.g., whether participants knew which intervention was the "intervention of interest" and which one was the "comparator"

Informed consent procedures (4a-ii) can create biases and certain expectations - discuss e.g., whether participants knew which intervention was the "intervention of interest" and which one was the "comparator".

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subitem not at all important \(\cap \) \(\cap \) \(\cap \) essential

Does your paper address subitem 11a-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Excerpt from the newsletter to participants:

"We would like to propose to you to test the effectiveness of two therapeutic stress management programs Called "self-help", delivered either by a therapist or by digital support with a limited contact time. The objective of this study is to show that each of these two programs is effective in treating anxiety, and to compare them equally."

11b) If relevant, description of the similarity of interventions

(this item is usually not relevant for ehealth trials as it refers to similarity of a placebo or sham intervention to a active medication/intervention)

Does your paper address CONSORT subitem 11b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The content of the two programs is identical but they differ from their materials (computer for one, face-to-face for the other)."

12a) Statistical methods used to compare groups for primary and secondary outcomes

NPT: When applicable, details of whether and how the clustering by care providers or centers was addressed

Does your paper address CONSORT subitem 12a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

2.5% type 1 error will be used to compare the 6-month change between the experimental and the control group.

The efficacy of the two therapeutic programs (in face-to-face versus digital support) at 2 and 6 months will be compared using an analysis of covariance at the 5% significance level to compare the variations in the STAI score between the groups, adjusting for the baseline value. VAS satisfaction, consumption of tobacco, alcohol and drug use will be analyzed in each group using descriptive statistics.

12a-i) Imputation techniques to deal with attrition / missing values

Imputation techniques to deal with attrition / missing values: Not all participants will use the intervention/comparator as intended and attrition is typically high in ehealth trials. Specify how participants who did not use the application or dropped out from the trial were treated in the statistical analysis (a complete case analysis is strongly discouraged, and simple imputation techniques such as LOCF may also be problematic [4]).

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Does your paper address subitem 12a-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to

indicate direct quotes from your manuscript), or elaborate on this item by providing additional
information not in the ms, or briefly explain why the item is not applicable/relevant for your study

All analyses for the primary and secondary objectives will be performed on all randomized patients in their original group of randomization	
according to intention to treat principles (ITT). No subgroup analysis will	
be performed.	

12b) Methods for additional analyses, such as subgroup analyses and adjusted analyses

Does your paper address CONSORT subitem 12b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable for this study	
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X26) REB/IRB Approval and Ethical Considerations [recommended as subheading under "Methods"] (not a CONSORT item)

X26-i) Comment on ethics committee approval

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Does your paper address subitem X26-i?

"The project was approve IV.	d by local et	hics comn	nittees - CP	P Nord Oue	st
Approval Number: CPP 1 research in France"	5/12 - as is r	equired fo	or medical ir	ntervention	
x26-ii) Outline informed	consent pro	ocedures			
Outline informed consent p	rocedures e	.g., if cons			e or online (how? Checkbox, ems to be included in informe
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Does your paper address subitem X26-ii?

subitem not at all important \(\cap \) \(\cap \) \(\cap \) essential

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Outline informed consent procedures was obtained offline: "During a medical interview, the participants will have complete oral and written information detailing the progress of the trial. A newsletter will be given to the participant before it is included in the study, allowing the participant to have a period of reflection. Informed consent will be collected for each topic before they enter the study (Multimedia Appendix 1)."

X26-iii) Safety and security procedures

Safety and security procedures, incl. privacy considerations, and any steps taken to reduce the likelihood or detection of harm (e.g., education and training, availability of a hotline)

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Does your paper address subitem X26-iii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The processing of the data will be carried out under the conditions of confidentiality defined by the law of 6 January 1978 as amended relating to data processing, files and freedoms 'Commission nationale de l'informatique et des libertés' (CNIL). The processing of the data will be carried out in accordance with the requirements of the CNIL reference methodology." (Multimedia Appendix 2).

RESULTS

13a) For each group, the numbers of participants who were randomly assigned, received intended treatment, and were analysed for the primary outcome

NPT: The number of care providers or centers performing the intervention in each group and the number of patients treated by each care provider in each center

Does your paper address CONSORT subitem 13a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable for this study since we are not describing Seren@ctif results in this manuscrit.

13b) For each group, losses and exclusions after randomisation, together with reasons

Does your paper address CONSORT subitem 13b? (NOTE: Preferably, this is shown in a CONSORT flow diagram) *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable for this study since we are not describing Seren@ctif results in this manuscrit.	
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13b-i) Attrition diagram

Strongly recommended: An attrition diagram (e.g., proportion of participants still logging in or using the intervention/comparator in each group plotted over time, similar to a survival curve) or other figures or tables demonstrating usage/dose/engagement.

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subitem not at all important	0	0	0	•	0	essentia

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Copy and paste relevant sections from the manuscript or cite the figure number if applicable (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not relevant for this study but we are going to use this for futur studies with the use of the internet.	

14a) Dates defining the periods of recruitment and follow-up

Does your paper address CONSORT subitem 14a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Duration of inclusion period: 24 months Duration of participation in a study: 6 months Duration of data analysis: 6 months Duration of research: 3 years"	
	1

14a-i) Indicate if critical "secular events" fell into the study period

Indicate if critical "secular events" fell into the study period, e.g., significant changes in Internet resources available or "changes in computer hardware or Internet delivery resources"

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subitem not at all important	0	0	0	•	0	essential

Does your paper address subitem 14a-i?

Not relevant for this study: the study is not dependent on internet resources
It is a computer-based program, and a USB key is supplied to the patient from the first session with all sessions.

14b) Why the trial ended or was stopped (early)

Does your paper address CONSORT subitem 14b? * Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional)
information not in the ms, or briefly explain why the item is not applicable/relevant for your study	
15) A table showing baseline demographic and clinical	
characteristics for each group	
NPT: When applicable, a description of care providers (case volume, qualification, expertise, et	c.)
and centers (volume) in each group	,
Does your paper address CONSORT subitem 15? *	
Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional)
information not in the ms, or briefly explain why the item is not applicable/relevant for your study	
Not applicable for this study.	
We will integrate this table and we will have collected all our data	
We will integrate this table once we will have collected all our data	
15-i) Report demographics associated with digital divide issues	
In ehealth trials it is particularly important to report demographics associated with digital divide issue	s,
such as age, education, gender, social-economic status, computer/Internet/ehealth literacy of the	
participants, if known.	
1 2 3 4 5	

Does your paper address subitem 15-i? *

subitem not at all important O O O essential

Not applicable for the protocol but once we have the results of the study we will report all this data.
16) For each group, number of participants
(denominator) included in each analysis and whether
the analysis was by original assigned groups
16-i) Report multiple "denominators" and provide definitions Report multiple "denominators" and provide definitions: Report N's (and effect sizes) "across a range of study participation [and use] thresholds" [1], e.g., N exposed, N consented, N used more than x times, N used more than y weeks, N participants "used" the intervention/comparator at specific pre-defined time points of interest (in absolute and relative numbers per group). Always clearly define "use" of the intervention.
1 2 3 4 5
subitem not at all important O O o o essential
Does your paper address subitem 16-i? * Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study Not applicable for the protocol.
16-ii) Primary analysis should be intent-to-treat Primary analysis should be intent-to-treat, secondary analyses could include comparing only "users", with the appropriate caveats that this is no longer a randomized sample (see 18-i).
1 2 3 4 5
subitem not at all important \(\cap \) \(\cap \) essential

Does your paper address subitem 16-ii?

All analyses for the primary and secondary objectives will be performed on all randomized patients in their original group of randomization according to intention to treat principles (ITT).

Deviations to the protocol will be defined in a detailed statistical analysis plan which does not appear in the manuscript.

17a) For each primary and secondary outcome, results for each group, and the estimated effect size and its precision (such as 95% confidence interval)

Does your paper address CONSORT subitem 17a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable for this study since we are not describing Seren@ctif results in this manuscrit.	

17a-i) Presentation of process outcomes such as metrics of use and intensity of use

In addition to primary/secondary (clinical) outcomes, the presentation of process outcomes such as metrics of use and intensity of use (dose, exposure) and their operational definitions is critical. This does not only refer to metrics of attrition (13-b) (often a binary variable), but also to more continuous exposure metrics such as "average session length". These must be accompanied by a technical description how a metric like a "session" is defined (e.g., timeout after idle time) [1] (report under item 6a).

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Does your paper address subitem 17a-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable for this study. In this study we are not describing results of Seren@ctif trial participants. Our aim is to describe design and implementation of this research.

17b) For binary outcomes, presentation of both absolute and relative effect sizes is recommended

Does your paper address CONSORT subitem 17b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable for this study. In this study we are not describing results of Seren@ctif trial participants. Our aim is to describe design and implementation of this research.

18) Results of any other analyses performed, including subgroup analyses and adjusted analyses, distinguishing pre-specified from exploratory

Does your paper address CONSORT subitem 18? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable for this study. In this study we are not describing results of Seren@ctif trial participants. Our aim is to describe design and implementation of this research.	
	l

18-i) Subgroup analysis of comparing only users

A subgroup analysis of comparing only users is not uncommon in ehealth trials, but if done, it must be stressed that this is a self-selected sample and no longer an unbiased sample from a randomized trial (see 16-iii).

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subitem not at all important	0	0	•	0	0	essential

Does your paper address subitem 18-i?

Not relevant for this study : subgroup analysis will be performed.
19) All important harms or unintended effects in each
group
(for specific guidance see CONSORT for harms)
Does your paper address CONSORT subitem 19? * Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study At this time, no adverse reactions have been reported. "We mean by undesirable effects: any event that; Causes death, involves the life-threatening condition of the person who is suitable for research, requires hospitalization or prolongation of hospitalization, causes a significant or lasting disability or handicap, results in a congenital anomaly or malformation, And for the drug, regardless of the dose administered, is considered to be medically serious by the investigator." 19-i) Include privacy breaches, technical problems Include privacy breaches, technical problems. This does not only include physical "harm" to participants.
but also incidents such as perceived or real privacy breaches [1], technical problems, and other unexpected/unintended incidents. "Unintended effects" also includes unintended positive effects [2].
1 2 3 4 5
subitem not at all important O O O essential
Does your paper address subitem 19-i? Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study Not applicable for this study: for the moment, no privacy breaches, no technical problems or unexpected incidents.

19-ii) Include qualitative feedback from participants or observations from staff/researchers Include qualitative feedback from participants or observations from staff/researchers, if available, on

strengths and shortcomings of the application, especially if they point to unintended/unexpected effects or uses. This includes (if available) reasons for why people did or did not use the application as intended by the developers.

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Does your paper address subitem 19-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable for this protocole but we assess the overall satisfaction of the program with the participants: "The visual analogue scale of satisfaction (VAS-satisfaction) measures the overall satisfaction of the program".

Observations by staff and researchers are not explicitly evaluated but will be taken into account for further development of the program.

DISCUSSION

22) Interpretation consistent with results, balancing benefits and harms, and considering other relevant evidence

NPT: In addition, take into account the choice of the comparator, lack of or partial blinding, and unequal expertise of care providers or centers in each group

22-i) Restate study questions and summarize the answers suggested by the data, starting with primary outcomes and process outcomes (use)

Restate study questions and summarize the answers suggested by the data, starting with primary outcomes and process outcomes (use).

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Does your paper address subitem 22-i? *

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21) Generalisability (external validity, applicability) of the trial findings

NPT: External validity of the trial findings according to the intervention, comparators, patients, and care providers or centers involved in the trial

21-i) Generalizability to other populations

Generalizability to other populations: In particular, discuss generalizability to a general Internet population, outside of a RCT setting, and general patient population, including applicability of the study results for other organizations

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subitem not at all important \(\cap \) \(\cap \) \(\cap \) essential

Does your paper address subitem 21-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

We would propose that the program is not just for the psychiatric population (tertiary prevention) but for a wider population exposed to stress that may suffer from stress-related disorders (primary and secondary prevention).

This program would make it easier to access treatment with the aim of preventing stress, which is not sufficient in France at the present time.

21-ii) Discuss if there were elements in the RCT that would be different in a routine application setting

Discuss if there were elements in the RCT that would be different in a routine application setting (e.g., prompts/reminders, more human involvement, training sessions or other co-interventions) and what impact the omission of these elements could have on use, adoption, or outcomes if the intervention is applied outside of a RCT setting.

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subitem not at all important \(\cap \) \(\cap \) \(\cap \) essential

Does your paper address subitem 21-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to

indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

In clinical practice, a way to assess and reinforce adherence should be found. This issue is why we plan to improve this program by integrating tools from new information and communication technologies (e-CBT, m-CBT, e-coaching, telemedicine) and rely on a recent literature review concerning adherence to self-help treatment with digital media

OTHER INFORMATION

23) Registration number and name of trial registry

Does your paper address CONSORT subitem 23? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Trial Registration	
Clinicaltrials.gov NCT02621775: https://clinicaltrials.gov/show/NCT02621775"	

24) Where the full trial protocol can be accessed, if available

Does your p	paper	address	CONSORT	subitem	24? *
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Cite a Multimedia Appendix, other reference, or copy and paste relevant sections from the manuscript
(include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or
elaborate on this item by providing additional information not in the ms, or briefly explain why the item is
not applicable/relevant for your study

25) Sources of funding and other support	(such	as
supply of drugs), role of funders		

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Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to
ndicate direct quotes from your manuscript), or elaborate on this item by providing additional
nformation not in the ms, or briefly explain why the item is not applicable/relevant for your study

"This work was supported by funding from the French Ministry of health					

X27) Conflicts of Interest (not a CONSORT item)

X27-i) State the relation of the study team towards the system being evaluated

In addition to the usual declaration of interests (financial or otherwise), also state the relation of the study team towards the system being evaluated, i.e., state if the authors/evaluators are distinct from or identical with the developers/sponsors of the intervention.

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subitem not at all important \(\cap \) \(\cap \) \(\cap \) essential

Does your paper address subitem X27-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Conflicts of Interest: None declared. No financial conflicts and the evaluators are distinct from the developer of this program."

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As a result of using this checklist, did you make changes in your manuscript? *

🔘 yes, major changes

• yes, minor changes

O no

What were the most important changes you made as a result of using this checklist?

It allowed us to know the specific places of the modifications expected by the reviewers on the manuscript.	
It allowed us to specify certain things that were too implicit (for example the choice of comparators) or not sufficiently clear (objectives	
of the study).	
How much time did you spend on going through the checklist INCL your manuscript *	UDING making changes in
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As a result of using this checklist, do you think your manuscript ha	s improved? *
• yes	
○ no	
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Would you like to become involved in the CONSORT EHEALTH groundly and involve for example becoming involved in participating in a wave-up and Elaboration and	-
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Any other comments or questions on CONSORT EHEALTH	
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